# HIV REPORTING UPDATE – FEBRUARY 2007

### **Quality Assurance Reports**

In January 2007, the California Department of Health Services, Office of AIDS (CDHS/OA) distributed the latest HIV/AIDS surveillance quality assurance reports to local health departments (LHDs) statewide. The documentation included the Error Report, which details missing, unknown, or incorrect surveillance information, and the No Reported Risk (NRR) Factor Report, which includes a list of HIV/AIDS cases reported without patient risk information that remain open. LHD staff with questions or technical assistance needs regarding the quality assurance reports should contact their OA surveillance coordinator.

#### No Identified Risk Closure and Reclassification Checklist

Tracking patient risk history as part of HIV/AIDS surveillance efforts is vital to monitoring current trends in the epidemic. The Centers for Disease Control and Prevention (CDC), which provides federal funding to U.S. states and territories to conduct HIV/AIDS surveillance, has established minimum standards for the completeness of HIV risk information. According to CDC guidelines, at least 85 percent of reported HIV/AIDS cases should include patient risk information subsequent to case follow-up. Cases with unknown risk factors subsequent to follow-up are classified by CDC as NRR and will be investigated. According to CDC guidelines, NRR cases should be reclassified as No Identified Risk (NIR) and closed when: (1) all available data sources have been reviewed or contacted, or (2) one year has elapsed since the date of the initial case report regardless of whether case follow-up was initiated or completed. OA has developed an NIR Closure and Reclassification Checklist to assist LHDs to document the status of NRR and NIR cases. At any time, NIR cases may be reclassified according to one of the CDC-defined risk categories if new information about patient risk factors is discovered. To reclassify NIR cases, LHDs may resubmit the Checklist paperwork with the updated risk information to OA. Because NRR cases that remain open are routinely included on OA quarterly assurance reports, completing the Checklist helps to minimize the duplication of efforts associated with the review of NRR cases. For additional information or assistance in completing the Checklist, LHD staff should contact their OA surveillance coordinator.

#### Technical Malfunction Affects HIV/AIDS Case Counts for January 2007

A technical malfunction interrupted the transfer of HIV/AIDS cases into the statewide HIV/AIDS Reporting System (HARS) from computer disks submitted by LHDs in January. As a result, case counts for the reporting period ending on January 31, 2007, do not reflect the actual number of HIV/AIDS cases reported statewide. Both HIV and AIDS cases that were not properly loaded into HARS have been loaded and will be counted in the February 2007 surveillance reports. The computer malfunction has been corrected and steps have been taken to prevent this problem from happening in the future.

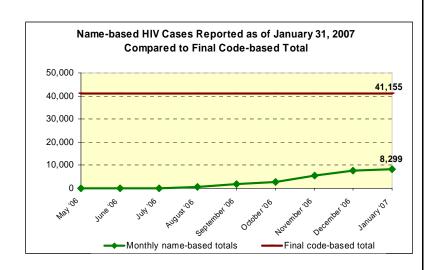
#### **HIV Reporting Requirements**

OA has received questions regarding which elements of the HIV/AIDS Case Report Form are required to be reported. Under the emergency HIV reporting regulations that took effect January 8, 2007, health care providers and LHDs are required to submit a completed copy of the HIV/AIDS Case Report Form (see the California Code of Regulations [CCR], Title 17, Sections 2641.55 [definition of form], 2643.5 [provider reporting], and 2643.15 [LHD reporting]). As specified under CCR, Title 17, Section 2643.5, "The report shall consist of a completed copy of the HIV/AIDS Case Report Form." According to these regulations, all elements of the HIV/AIDS Case Report Form must be completed in order to fulfill the reporting responsibilities. The form has been updated to ensure that elements previously reported for AIDS cases but not for HIV cases, such as patient name, Social Security Number, medical record number, and street address, are now required for both HIV and AIDS cases. All elements of the HIV/AIDS Case Report Form are required and will continue to be required while emergency HIV reporting regulations are in effect. For more information about the emergency HIV reporting regulations, visit the OA Website at: <a href="https://www.dhs.ca.gov/ps/ooa/HIVReporting/Regulations">www.dhs.ca.gov/ps/ooa/HIVReporting/Regulations</a>.

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## HIV Case Counts<sup>1</sup> as of January 2007

As of January 31, 2007, a total of 8,299 cases of HIV infection have been reported by name. Prior to April 2006, a total of 41,155 HIV cases were reported under the non-name code system. The current statewide HIV reporting level represents 20 percent of the total code-based cases reported. At this time, over two-thirds of LHDs across California (or 42 LHDs) have submitted name-based HIV case reports to OA. During the month of January, six additional LHDs began reporting HIV cases by name, including: Contra Costa, Del Norte, Lake, Merced, Shasta, and Sierra Counties. For additional information, or to view monthly HIV surveillance reports, visit OA's Web site at www.dhs.ca.gov/AIDS/Statistics.



### Comparison of Name-Based HIV Cases to Total Code-Based Cases Reported by County in California

Comparison	of Name-E	Based HIV (	Cases to Total Co
COUNTY	NAME- BASED* CASES	CODE- BASED** CASES	RATIO OF NAME TO CODE-BASED CASES
Alameda	199	1,713	12%
Berkeley	0	123	0%
Alpine	0	1	0%
Amador	2	21	10%
Butte	17	87	20%
Calaveras	1	3	33%
Colusa	1	3	33%
Contra Costa	1	688	0%
Del Norte	3	16	19%
El Dorado	0	49	0%
Fresno	35	692	5%
Glenn	0	4	0%
Humboldt	13	93	14%
Imperial	34	61	56%
Inyo	0	2	0%
Kern	30	534	6%
Kings	0	95	0%
Lake	1	33	3%
Lassen	1	8	13%
Los Angeles	2,174	15,304	14%
Long Beach	446	1,397	32%
Pasadena	7	130	5%
Madera	27	106	25%
Marin	18	352	5%
Mariposa	0	5	0%
Mendocino	3	48	6%
Merced	9	48	19%
Modoc	0	0	0%
Mono	0	0	0%
Monterey	0	162	0%
Napa	35	73	48%
Nevada	1	11	9%

COUNTY	NAME- BASED* CASES	CODE- BASED** CASES	RATIO OF NAME TO CODE-BASED CASES
Orange	222	2,155	10%
Placer	0	51	0%
Plumas	0	4	0%
Riverside	279	1,691	16%
Sacramento	167	814	21%
San Benito	0	2	0%
San Bernardino	215	1,271	17%
San Diego	1,476	4,944	30%
San Francisco	2,640	6,182	43%
San Joaquin	123	411	30%
San Luis Obispo	0	133	0%
San Mateo	15	392	4%
Santa Barbara	16	143	11%
Santa Clara	150	1,017	15%
Santa Cruz	1	152	1%
Shasta	4	16	25%
Sierra	1	0	٨
Siskiyou	0	6	0%
Solano	20	418	5%
Sonoma	149	415	36%
Stanislaus	43	214	20%
Sutter	0	24	0%
Tehama	0	4	0%
Trinity	0	0	0%
Tulare	12 4	79 13	15%
Tuolumne Ventura	4 152	313	31% 49%
Yolo	152	62	49% 6%
Yuba	0	62 14	0%
Unknown	1	3	33%
Olikilowil		3	33%
TOTAL	8,299	41,155	20%

<sup>^</sup> HIV name-based case count exceeds code-based total

<sup>\*</sup>Source: CDHS/OA, HIV/AIDS Case Registry Section, data as of January 31, 2007.

<sup>\*\*</sup>Source: CDHS/OA, HIV/AIDS Case Registry Section, data as of March 31, 2006.

<sup>&</sup>lt;sup>1</sup> On a monthly basis, OA disseminates summary statistics that describe the extent of California's HIV/AIDS epidemic. These routine surveillance reports are available on OA's Web site at <a href="https://www.dhs.ca.gov/AIDS/Statistics">www.dhs.ca.gov/AIDS/Statistics</a>. Beginning in April 2006, the monthly HIV statistics published by OA reflect the number of HIV cases reported by name. For HIV statistics based on cases reported by non-name code, refer to surveillance reports published prior to April 2006, available on OA's Web site.